

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the lines

West Virginia Republican Party, Inc.

ADDRESS (number and street)

5 Greenbrier St

☐Check if different
than previously
reported. (ACC)

Charleston

WV

25311

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00417063

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15
Quarterly Report(Q1)☐July 15
Quarterly Report(Q2)☐October 15
Quarterly Report(Q3)☐January 31
Quarterly Report(YE)☐July 31 Mid-Year
Report(Non-election
Year Only) (MY)☐Termination Report
(TER)(b) Monthly
Report
Due On:☐

Feb 20 (M2)

☒

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)
(Non-Election
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)
(Non-Election
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the
State of(d) 30-Day
Post-Election
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

04

01

2010

through

04

30

2010

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Greg Smith

Signature of Treasurer

Electronically Filed by Greg Smith

Date

05

20

2010

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office
Use
Only**FEC FORM 3X**
(Rev. 12/2004)

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

2 / 27

Write or Type Committee Name
West Virginia Republican Party, Inc.

Report Covering the Period: From:

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	4

D	D
3	0

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1	2010	7507.93
(b) Cash on Hand at Beginning of Reporting Period	16661.56	
(c) Total Receipts (from Line 19)	22631.61	64854.31
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	39293.17	72362.24
7. Total Disbursements (from Line 31)	19038.78	52107.85
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	20254.39	20254.39
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	39927.00	

☐ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

West Virginia Republican Party, Inc.

Report Covering the Period:

From:

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	1	0

To:

M	M
0	4

D	D
3	0

Y	Y	Y	Y
2	0	1	0

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	5061.61	24446.24
(ii) Unitemized	17570.00	40408.07
(iii) TOTAL (add Lines 11(a)(i) and (ii)	22631.61	64854.31
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	22631.61	64854.31
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	22631.61	64854.31
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	22631.61	64854.31

DETAILED SUMMARY PAGE

of Disbursements

4 / 27

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Shared Federal/Non-Federal Activity (from Schedule H4)			
(i) Federal Share.....	0.00	0.00	
(ii) Non-Federal Share.....	0.00	0.00	
(b) Other Federal Operating Expenditures.....	19038.78	52107.85	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➤	19038.78	52107.85	
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00	
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00	
24. Independent Expenditure (use Schedule E)	0.00	0.00	
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00	
26. Loan Repayments Made.....	0.00	0.00	
27. Loans Made.....	0.00	0.00	
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees	0.00	0.00	
(b) Political Party Committees	0.00	0.00	
(c) Other Political Committees (such as PACs)	0.00	0.00	
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00	
29. Other Disbursements.....	0.00	0.00	
30. Federal Election Activity (2 U.S.C 431(20))			
(a) Shared Federal Election Activity (from Schedule H6)			
(i) Federal Share	0.00	0.00	
(ii) "Levin" Share	0.00	0.00	
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00	
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00	
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	19038.78	52107.85	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	19038.78	52107.85	

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

5 / 27

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	22631.61	64854.31
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	22631.61	64854.31
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	19038.78	52107.85
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	19038.78	52107.85

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 27

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

West Virginia Republican Party, Inc.

A.

Full Name (Last, First, Middle Initial)

Dr. Douglas E. McKinney, MD

Mailing Address 636 Rivendell Drive

City

Bridgeport

State

WV

Zip Code

26330-1358

FEC ID number of contributing
federal political committee.

C

Name of Employer
Va Medical Center

Occupation
M.D.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4456.24

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 0 / 2 0 1 0

Transaction ID: A9D250AC9580A4A72AC3

Amount of Each Receipt this Period

16.04

In-kind:postage

B.

Full Name (Last, First, Middle Initial)

Dr. Douglas E. McKinney, MD

Mailing Address 636 Rivendell Drive

City

Bridgeport

State

WV

Zip Code

26330-1358

FEC ID number of contributing
federal political committee.

C

Name of Employer
Va Medical Center

Occupation
M.D.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4456.24

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 0 / 2 0 1 0

Transaction ID: A63B30A2FCFA445E08CA

Amount of Each Receipt this Period

8.83

In-kind:office supplies

C.

Full Name (Last, First, Middle Initial)

Dr. Douglas E. McKinney, MD

Mailing Address 636 Rivendell Drive

City

Bridgeport

State

WV

Zip Code

26330-1358

FEC ID number of contributing
federal political committee.

C

Name of Employer
Va Medical Center

Occupation
M.D.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4456.24

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 0 / 2 0 1 0

Transaction ID: A74FFEE9B6AFA437EA4F

Amount of Each Receipt this Period

66.00

In-kind:office supplies

SUBTOTAL of Receipts This Page (optional)

90.87

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 27

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

West Virginia Republican Party, Inc.

A.

Full Name (Last, First, Middle Initial)

Dr. Douglas E. McKinney, MD

Mailing Address 636 Rivendell Drive

City

Bridgeport

State

WV

Zip Code

26330-1358

FEC ID number of contributing
federal political committee.

C

Name of Employer
Va Medical Center

Occupation
M.D.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4456.24

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 0 / 2 0 1 0

Transaction ID: ABBE2CB97D3C743089A2

Amount of Each Receipt this Period

44.25

In-kind:

B.

Full Name (Last, First, Middle Initial)

Dr. Douglas E. McKinney, MD

Mailing Address 636 Rivendell Drive

City

Bridgeport

State

WV

Zip Code

26330-1358

FEC ID number of contributing
federal political committee.

C

Name of Employer
Va Medical Center

Occupation
M.D.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4456.24

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 0 / 2 0 1 0

Transaction ID: A45BCF83DB4EF46FAB71

Amount of Each Receipt this Period

69.82

In-kind:postage

C.

Full Name (Last, First, Middle Initial)

Dr. Douglas E. McKinney, MD

Mailing Address 636 Rivendell Drive

City

Bridgeport

State

WV

Zip Code

26330-1358

FEC ID number of contributing
federal political committee.

C

Name of Employer
Va Medical Center

Occupation
M.D.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4456.24

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 0 / 2 0 1 0

Transaction ID: AE83FB4407FD5400FAB7

Amount of Each Receipt this Period

56.67

In-kind:office supplies

SUBTOTAL of Receipts This Page (optional)

170.74

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 27

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

West Virginia Republican Party, Inc.

A.

Full Name (Last, First, Middle Initial)

Greg Smith

Mailing Address 600 55th St.

City

Vienna

State

WV

Zip Code

26105-3218

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 9 / 2 0 1 0

Transaction ID: AE951487F15164B7B88B

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

Greg Smith

Mailing Address 600 55th St.

City

Vienna

State

WV

Zip Code

26105-3218

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 0 / 2 0 1 0

Transaction ID: AC5885AAEB04A48078DE

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

Greg Smith

Mailing Address 600 55th St.

City

Vienna

State

WV

Zip Code

26105-3218

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 0 / 2 0 1 0

Transaction ID: A742320BFE44E44C6875

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

250.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 27

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

West Virginia Republican Party, Inc.

A.

Full Name (Last, First, Middle Initial)

Dr. Stephen Shy

Mailing Address 3174 Rt. 75

City

Huntington

State

WV

Zip Code

25704-9150

FEC ID number of contributing
federal political committee.

C

Name of Employer
SelfOccupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	2		2	0	1	0

Transaction ID: AD1B89AEAF5BE4AFF8ED

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Eleanor Herkness

Mailing Address PO Box 511

City

Lewisburg

State

WV

Zip Code

24901-0511

FEC ID number of contributing
federal political committee.

C

Name of Employer
RetiredOccupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	2		2	0	1	0

Transaction ID: AF40B87D559C044A288F

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)

Dr. Douglas E. McKinney, MD

Mailing Address 636 Rivendell Drive

City

Bridgeport

State

WV

Zip Code

26330-1358

FEC ID number of contributing
federal political committee.

C

Name of Employer
Va Medical CenterOccupation
M.D.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4556.24

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	9		2	0	1	0

Transaction ID: A757809F75BE14B98B56

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

850.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 27

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

West Virginia Republican Party, Inc.

A.

Full Name (Last, First, Middle Initial)

Janice Kathy Baliker

Mailing Address 1126 Blue Horizon Dr

City

Morgantown

State

WV

Zip Code

26501-2063

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 3 0 / 2 0 1 0

Transaction ID: A04B400EAC902421D884

Amount of Each Receipt this Period

600.00

B.

Full Name (Last, First, Middle Initial)

Daniel McGraw, MD

Mailing Address 705 Garfield Avenue

City

Parkersburg

State

WV

Zip Code

26101-5444

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation

Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 3 0 / 2 0 1 0

Transaction ID: A42087BCC01874B2CBFC

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Bennet Hatfield

Mailing Address P.O. Box 2405

City

Charleston

State

WV

Zip Code

25329-2405

FEC ID number of contributing
federal political committee.

C

Name of Employer
International Coal Group

Occupation

Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 3 0 / 2 0 1 0

Transaction ID: ADE6E040558004F26A8B

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

1350.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 27

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

West Virginia Republican Party, Inc.

A.

Full Name (Last, First, Middle Initial)

K.A. Ammar, Jr.

Mailing Address 2045 Maryland Ave

City

Bluefield

State

WV

Zip Code

24701-4427

FEC ID number of contributing
federal political committee.

C

Name of Employer
Ammar Inc.

Occupation

Corporation Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		3	0		2	0	1	0

Transaction ID: A5440DCF2E4FB47B192A

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)

Zane Lawhorn

Mailing Address 1043 Stafford Dr.

City

Princeton

State

WV

Zip Code

24740-2409

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation

Optometrist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		3	0		2	0	1	0

Transaction ID: A2E961635EC78415C8E5

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)

Mr. Jay Nesbitt

Mailing Address 5314 Stonybrook Rd.

City

Charleston

State

WV

Zip Code

25313-1777

FEC ID number of contributing
federal political committee.

C

Name of Employer
State Farm

Occupation

Self Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		3	0		2	0	1	0

Transaction ID: AEDD0A99EE15C4BDB991

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

1250.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 27

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

West Virginia Republican Party, Inc.

A.

Full Name (Last, First, Middle Initial)

Greg Smith

Mailing Address 600 55th St.

City

Vienna

State

WV

Zip Code

26105-3218

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 3 0 / 2 0 1 0

Transaction ID: AC7C90894D8C54FA6801

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

James W. Reed

Mailing Address 1314 Virginia Street, East

City

Charleston

State

WV

Zip Code

25301

FEC ID number of contributing
federal political committee.

C

Name of Employer
Reed Brothers

Occupation

Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 3 0 / 2 0 1 0

Transaction ID: AA4AB2570AD3B4008A17

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)

1100.00

TOTAL This Period (last page this line number only)

5061.61

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 13 / 27

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

West Virginia Republican Party, Inc.

A.	Full Name (Last, First, Middle Initial) Fibernet			Transaction ID: B7141CFC047F24180BF7		
	Mailing Address PO Box 2021			Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 1 / 2 0 1 0		
	City Mechanicsburg	State PA	Zip Code 17055	Amount of Each Disbursement this Period 539.67		
	Purpose of Disbursement telecommunications		Category/ Type			
	Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:						
B.	Full Name (Last, First, Middle Initial) Aristotle International			Transaction ID: B1E12564F50264DBB811		
	Mailing Address 205 Pennsylvania Ave			Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 1 / 2 0 1 0		
	City Washington	State DC	Zip Code 20003	Amount of Each Disbursement this Period 900.00		
	Purpose of Disbursement Database Services		Category/ Type			
	Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:						
C.	Full Name (Last, First, Middle Initial) Troy A. Berman			Transaction ID: B544FA62C45C840C4A74		
	Mailing Address 11 Greenbrier St Apt 19			Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 1 / 2 0 1 0		
	City Charleston	State WV	Zip Code 25311-2182	Amount of Each Disbursement this Period 3333.34		
	Purpose of Disbursement consulting fee		Category/ Type			
	Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:						

SUBTOTAL of Disbursements This Page (optional)

4773.01

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 14 / 27

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

West Virginia Republican Party, Inc.

A. Full Name (Last, First, Middle Initial) Appalachian Electric Power	Transaction ID: B4B157BE7AD6F4C83960 Date of Disbursement																				
Mailing Address PO Box 24413	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		0	1		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		0	1		2	0	1	0												
City Canton State OH Zip Code 44701	Amount of Each Disbursement this Period																				
Purpose of Disbursement utilities	<table border="1"> <tr> <td colspan="10">184.49</td> </tr> </table>	184.49																			
184.49																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Cheryl Rust	Transaction ID: BE1DFC5B0911E4D42A67 Date of Disbursement																				
Mailing Address Route 1, Box 375	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		0	1		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		0	1		2	0	1	0												
City Buffalo State WV Zip Code 25033-9766	Amount of Each Disbursement this Period																				
Purpose of Disbursement consulting	<table border="1"> <tr> <td colspan="10">1800.00</td> </tr> </table>	1800.00																			
1800.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Troy A. Berman	Transaction ID: B0DC10D58CFFC4733835 Date of Disbursement																				
Mailing Address 11 Greenbrier St Apt 19	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		0	1		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		0	1		2	0	1	0												
City Charleston State WV Zip Code 25311-2182	Amount of Each Disbursement this Period																				
Purpose of Disbursement reimbursement - expenses	<table border="1"> <tr> <td colspan="10">1975.17</td> </tr> </table>	1975.17																			
1975.17																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

3959.66

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 15 / 27

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

West Virginia Republican Party, Inc.

A. Full Name (Last, First, Middle Initial) Mountaineer Gas	Transaction ID: B0A77312185D04F08AA6 Date of Disbursement																				
Mailing Address PO Box 362	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		0	1		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		0	1		2	0	1	0												
City Charleston State WV Zip Code 25322	Amount of Each Disbursement this Period																				
Purpose of Disbursement utilities	<table border="1"> <tr> <td colspan="10">253.17</td> </tr> </table>	253.17																			
253.17																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Staples - Charleston	Transaction ID: B5875DF5D0D9D422BAAA Date of Disbursement																				
Mailing Address 2810 Mountaineer Blvd.	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>0</td><td>8</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		0	8		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		0	8		2	0	1	0												
City Charleston State WV Zip Code 25309	Amount of Each Disbursement this Period																				
Purpose of Disbursement office supplies	<table border="1"> <tr> <td colspan="10">175.95</td> </tr> </table>	175.95																			
175.95																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Dr. Douglas E. McKinney, MD	Transaction ID: B9D250AC9580A4A72AC3 Date of Disbursement																				
Mailing Address 636 Rivendell Drive	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		1	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		1	0		2	0	1	0												
City Bridgeport State WV Zip Code 26330-1358	Amount of Each Disbursement this Period																				
Purpose of Disbursement In-kind:postage	<table border="1"> <tr> <td colspan="10">16.04</td> </tr> </table>	16.04																			
16.04																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2009 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

445.16

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 16 / 27

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

West Virginia Republican Party, Inc.

A.

Full Name (Last, First, Middle Initial)

Dr. Douglas E. McKinney, MD

Mailing Address 636 Rivendell Drive

City
Bridgeport

State
WV

Zip Code
26330-1358

Purpose of Disbursement
In-kind: office supplies

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2009
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: B63B30A2FCFA445E08CA

Date of Disbursement

04 / 10 / 2010

Amount of Each Disbursement this Period

8.83

B.

Full Name (Last, First, Middle Initial)

Dr. Douglas E. McKinney, MD

Mailing Address 636 Rivendell Drive

City
Bridgeport

State
WV

Zip Code
26330-1358

Purpose of Disbursement
In-kind: office supplies

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2009
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: B74FFEE9B6AFA437EA4F

Date of Disbursement

04 / 10 / 2010

Amount of Each Disbursement this Period

66.00

C.

Full Name (Last, First, Middle Initial)

Dr. Douglas E. McKinney, MD

Mailing Address 636 Rivendell Drive

City
Bridgeport

State
WV

Zip Code
26330-1358

Purpose of Disbursement
In-kind:

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2009
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: BBBE2CB97D3C743089A2

Date of Disbursement

04 / 10 / 2010

Amount of Each Disbursement this Period

44.25

SUBTOTAL of Disbursements This Page (optional)

119.08

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 17 / 27

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

West Virginia Republican Party, Inc.

A.

Full Name (Last, First, Middle Initial)

Dr. Douglas E. McKinney, MD

Mailing Address 636 Rivendell Drive

City
BridgeportState
WVZip Code
26330-1358Purpose of Disbursement
In-kind:postage

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2009
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: B45BCF83DB4EF46FAB71

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	0		2	0	1	0

Amount of Each Disbursement this Period

69.82

B.

Full Name (Last, First, Middle Initial)

Dr. Douglas E. McKinney, MD

Mailing Address 636 Rivendell Drive

City
BridgeportState
WVZip Code
26330-1358Purpose of Disbursement
In-kind:office supplies

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2009
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: BE83FB4407FD5400FAB7

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	0		2	0	1	0

Amount of Each Disbursement this Period

56.67

C.

Full Name (Last, First, Middle Initial)

The Traz Group

Mailing Address The Reuben Sparks Building
26 South Maple AvenueCity
MarltonState
NJZip Code
08053Purpose of Disbursement
mail

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: B8F9E0341F3CF469D809

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	2		2	0	1	0

Amount of Each Disbursement this Period

7100.00

SUBTOTAL of Disbursements This Page (optional)

7226.49

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 18 / 27

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

West Virginia Republican Party, Inc.

A.

Full Name (Last, First, Middle Initial)

USPS

Mailing Address 1002 Lee Street East

City
Charleston

State
WV

Zip Code
25301

Purpose of Disbursement
postage

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: B73F1864D708A4D9AAD9

Date of Disbursement

04 / 12 / 2010

Amount of Each Disbursement this Period

1715.00

B.

Full Name (Last, First, Middle Initial)

USPS

Mailing Address 1002 Lee Street East

City
Charleston

State
WV

Zip Code
25301

Purpose of Disbursement
postage

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: B4CE788FFA6F94874B98

Date of Disbursement

04 / 19 / 2010

Amount of Each Disbursement this Period

500.00

C.

Full Name (Last, First, Middle Initial)

USPS

Mailing Address 1002 Lee Street East

City
Charleston

State
WV

Zip Code
25301

Purpose of Disbursement
postage

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: BD82ED03E456646529FA

Date of Disbursement

04 / 20 / 2010

Amount of Each Disbursement this Period

5.15

SUBTOTAL of Disbursements This Page (optional)

2220.15

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 19 / 27

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

West Virginia Republican Party, Inc.

A.

Full Name (Last, First, Middle Initial)

Officemax

Mailing Address 228 RLH Blvd

City
CharlestonState
WVZip Code
25309Purpose of Disbursement
office supplies

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: B0F4D48793870495A958

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	0		2	0	1	0

Amount of Each Disbursement this Period

42.38

B.

Full Name (Last, First, Middle Initial)

USPS

Mailing Address 1002 Lee Street East

City
CharlestonState
WVZip Code
25301Purpose of Disbursement
postage

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: B44DA4484911B4739A81

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	8		2	0	1	0

Amount of Each Disbursement this Period

7.50

C.

Full Name (Last, First, Middle Initial)

Aristotle International

Mailing Address 205 Pennsylvania Ave

City
WashingtonState
DCZip Code
20003Purpose of Disbursement
cc service fee

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: B97BB3DB4805E43FFB16

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		3	0		2	0	1	0

Amount of Each Disbursement this Period

14.00

SUBTOTAL of Disbursements This Page (optional)

63.88

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 20 / 27

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

West Virginia Republican Party, Inc.

A.

Full Name (Last, First, Middle Initial)

Aristotle International

Mailing Address 205 Pennsylvania Ave

City
Washington

State
DC

Zip Code
20003

Purpose of Disbursement
cc processing fee

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State:

District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: B6663C2AE518848C39EC

Date of Disbursement

/ /

Amount of Each Disbursement this Period

38.15

SUBTOTAL of Disbursements This Page (optional)

38.15

TOTAL This Period (last page this line number only)

18845.58

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 21 / 27

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

West Virginia Republican Party, Inc.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Cellular One/ A R SystemsNature of Debt (Purpose):
Cell Phone Bill from 4/1/-
05

Mailing Address P.O. Box 80766

City State ZIP Code
Valley Forge PA 19484

Outstanding Balance Beginning This Period

1057.45

Transaction ID: DC3068D8514F8455BB69

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1057.45

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Strategic TelecommunicationsNature of Debt (Purpose):
Interest on Strategic Fun-
draising

Mailing Address 7591 9th Street North

City State ZIP Code
Oakdale MN 55128

Outstanding Balance Beginning This Period

1639.49

Transaction ID: D869D6D1194434CB9B41

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1639.49

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Christine McnalleyNature of Debt (Purpose):
election contract consult-
ing-from 4/1/05

Mailing Address 44 Regent Court

City State ZIP Code
Swansea MA 02777

Outstanding Balance Beginning This Period

2400.00

Transaction ID: D25462FEAC2224BFE9E5

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2400.00

1) SUBTOTALS This Period This Page (optional).....

5096.94

2) TOTALS This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 22 / 27

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
West Virginia Republican Party, Inc.**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Regional Distributing CenterNature of Debt (Purpose):
Toner and cartridge from
4/1/05

Mailing Address 872 S. Milwaukee Avenue #293

City State ZIP Code
Libertyville IL 60048

Outstanding Balance Beginning This Period

369.85

Transaction ID: D0E587ECFD6C840AE9DC

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

369.85

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Tiffany GibsonNature of Debt (Purpose):
Contract labor and expenses
from 10/30/04

Mailing Address P.O. Box 425

City State ZIP Code
Parkersburg WV 26101

Outstanding Balance Beginning This Period

1030.95

Transaction ID: D88348031D76B4F6E893

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1030.95

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Bjw Printing & Office SuppliesNature of Debt (Purpose):
printing from 11/19/04

Mailing Address 3100 Robert Byrd Drive

City State ZIP Code
Beckley WV 25802

Outstanding Balance Beginning This Period

337.62

Transaction ID: D4EF771A3F5514EDD9BD

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

337.62

1) SUBTOTALS This Period This Page (optional).....

1738.42

2) TOTALS This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
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numbered line)

PAGE 23 / 27

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
West Virginia Republican Party, Inc.**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Bjw Printing & Office SuppliesNature of Debt (Purpose):
Interest

Mailing Address 3100 Robert Byrd Drive

City State ZIP Code
Beckley WV 25802

Outstanding Balance Beginning This Period

291.15

Transaction ID: D6825545A7104462E97A

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

291.15

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Time Warner CableNature of Debt (Purpose):
Victory Field Office cable
bill from 4/05

Mailing Address P.O Box 580485

City State ZIP Code
Charlotte NC 28258

Outstanding Balance Beginning This Period

135.00

Transaction ID: D7704A876900941CB963

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

135.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Feather Larson Synhorst-dciNature of Debt (Purpose):
fundraising calls from 10-
/31/2004

Mailing Address 7320 N Dreamy Draw Drive

City State ZIP Code
Phoenix AZ 85020

Outstanding Balance Beginning This Period

7119.20

Transaction ID: D6F78C6722F78438A82C

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

7119.20

1) **SUBTOTALS** This Period This Page (optional).....

7545.35

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
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numbered line)

PAGE 24 / 27

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
West Virginia Republican Party, Inc.**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Fibernet-charlestonNature of Debt (Purpose):
Victory Field Office Phone
Acct.26417

Mailing Address 211 Leon Sullivan Way

City State ZIP Code
Charleston WV 25301

Outstanding Balance Beginning This Period

872.87

Transaction ID: D8F0AC59401D741A28E3

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

872.87

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Fibernet-charlestonNature of Debt (Purpose):
Phones for 110 Capitol St.
Office

Mailing Address 211 Leon Sullivan Way

City State ZIP Code
Charleston WV 25301

Outstanding Balance Beginning This Period

1744.90

Transaction ID: D3B3C0EDD479D432D978

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1744.90

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Komax Business SystemsNature of Debt (Purpose):
copier service and parts
past due 10/04

Mailing Address 500 D Street

City State ZIP Code
South Charleston WV 25303

Outstanding Balance Beginning This Period

1960.01

Transaction ID: D0C9639D782124A75ADA

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1960.01

1) SUBTOTALS This Period This Page (optional).....

4577.78

2) TOTALS This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
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numbered line)

PAGE 25 / 27

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)
West Virginia Republican Party, Inc.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Komax Business Systems

Nature of Debt (Purpose):
Incorrect Debt Previously
Reported 7/05

Mailing Address 500 D Street

City State ZIP Code
South Charleston WV 25303

Outstanding Balance Beginning This Period

1.95

Transaction ID: D316A8B6DC2754ADFBC9

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1.95

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Tcs Technology Service

Nature of Debt (Purpose):
Computer Rental from 10/3-
0/2004

Mailing Address 4430 Kanawha Turnpike Suite B

City State ZIP Code
South Charleston WV 25309

Outstanding Balance Beginning This Period

927.31

Transaction ID: D9D2104C1A2E94DB3940

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

927.31

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Tcs Technology Service

Nature of Debt (Purpose):
Computer Rental from 9/30-
/2004

Mailing Address 4430 Kanawha Turnpike Suite B

City State ZIP Code
South Charleston WV 25309

Outstanding Balance Beginning This Period

506.32

Transaction ID: DB43F53E3F16E430DB25

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

506.32

1) **SUBTOTALS** This Period This Page (optional).....

1435.58

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 26 / 27

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
West Virginia Republican Party, Inc.**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Strategic FundraisingNature of Debt (Purpose):
fundraising services from
11/15/04

Mailing Address 7591 9th Street North

City State ZIP Code
Oakdale MN 55128

Outstanding Balance Beginning This Period

5411.86

Transaction ID: DD238924E343448EC960

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

5411.86

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Strategic FundraisingNature of Debt (Purpose):
Interest from 7/31/05

Mailing Address 7591 9th Street North

City State ZIP Code
Oakdale MN 55128

Outstanding Balance Beginning This Period

135.77

Transaction ID: D8DB931917DAA4E53924

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

135.77

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Strategic FundraisingNature of Debt (Purpose):
interest per Statement Summary today 1/08

Mailing Address 7591 9th Street North

City State ZIP Code
Oakdale MN 55128

Outstanding Balance Beginning This Period

689.32

Transaction ID: DC7D28A2143CB4F51AB5

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

689.32

1) SUBTOTALS This Period This Page (optional).....

6236.95

2) TOTALS This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
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numbered line)

PAGE 27 / 27

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
West Virginia Republican Party, Inc.**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Dennie Data CommNature of Debt (Purpose):
past due bill from 10/30/-
04

Mailing Address 1339 Smith Street

City State ZIP Code
Charleston WV 25301

Outstanding Balance Beginning This Period

428.32

Transaction ID: D24FCCC3C7843427C8F7

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

428.32

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
AlltellNature of Debt (Purpose):
Victory Cell Bill from 4/-
1/05

Mailing Address Bldg. 4 2nd Floor

City State ZIP Code
Little Rock AR 72202

Outstanding Balance Beginning This Period

8653.10

Transaction ID: D5F118EE3E608403BB7E

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

8653.10

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Ac Express, Inc.Nature of Debt (Purpose):
Travel expense for speaker
for conventio

Mailing Address 1150 Airport Road

City State ZIP Code
Fairmont WV 26554

Outstanding Balance Beginning This Period

4214.56

Transaction ID: DD7A1B8D4F58A4BE3ACB

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

4214.56

1) SUBTOTALS This Period This Page (optional).....

13295.98

2) TOTALS This Period (last page this line number only).....

39927.00

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....

0.00

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)

39927.00